

STATE OF NEW YORK
 UNITED STATES DISTRICT COURT
 DISTRICT: SOUTHERN DISTRICT OF NEW YORK

COUNTY OF

INDEX #: 08-CV-6413

Date Filed: July 17, 2008

ATTORNEY(S): State Farm: Law Offices of Stuart D. Markowitz P.C. PH: 516-935-3500

ADDRESS: 575 Jericho Tpke Ste 210 Jericho NY 11753 File No.:

State Farm Mutual Automobile Insurance Company a/s/o Amanda R. Fisher

vs

Plaintiff(s)/Petitioner(s)

United States Department of the Army and Thomas Groth

Defendant(s)/Respondent(s)

STATE OF NEW YORK, COUNTY OF NASSAU, SS.:

AFFIDAVIT OF SERVICE

Denise Klass, being duly sworn deposes and says: Deponent is not a party herein, is over 18 years of age and resides in New York State. On July 31, 2008 at _____, at The Pentagon, Washington DC, 20350, deponent served the within Summons in a Civil Action and Complaint

on: Department of the Army, Defendant therein named.

#1 INDIVIDUAL ☐ By delivering a true copy of each to said recipient personally; deponent knew the person served to be the person described as said person therein.

#2 CORPORATION ☐ By delivering thereat a true copy of each to _____ personally, deponent knew the person so served to be the _____ of the corporation, and authorized to accept service on behalf of the corporation.

#3 SUITABLE AGE PERSON ☐ By delivering a true copy of each to _____ a person of suitable age and discretion. Said premises is recipient's: [] actual place of business [] dwelling house (usual place of abode) within the state.

#4 AFFIXING TO DOOR ☐ By affixing a true copy of each to the door of said premises, which is recipient's: [] actual place of business [] dwelling house (place of abode) within the state.

Deponent was unable, with due diligence to find recipient or a person of suitable age and discretion, having called thereat

on the _____ day of _____ at _____
 on the _____ day of _____ at _____
 on the _____ day of _____ at _____
 on the _____ day of _____ at _____

Address confirmed by _____

#5 MAIL COPY ☐ On _____, deponent completed service by depositing a true copy of each document to the above address in a 1st Class postpaid properly addressed envelope marked "Personal and Confidential" in an official depository under the exclusive care and custody of the United States Post Office in the State of New York.

#6 DESCRIPTION ☐ A description of the Defendant, or other person served, or spoken to on behalf of the Defendant is as follows:

(use with #1, 2 or 3) Sex: _____ Color of skin: _____ Color of hair: _____ Age: _____ Height: _____
 Weight: _____ Other Features: _____

#7 WIT. FEES ☐ the authorized witness fee and / or traveling expenses were paid (tendered) to the recipient.

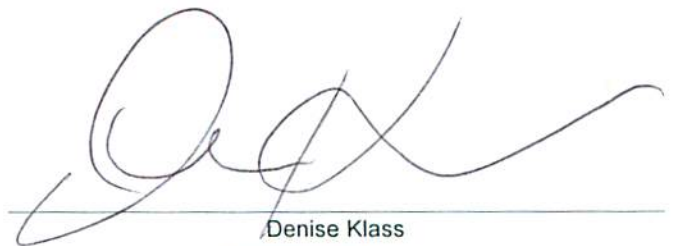
#8 MILITARYSRVC ☐ Deponent asked person spoken to whether the recipient was presently in military service of the United States Government or of the State of New York and was informed that recipient was not. Recipient wore ordinary civilian clothes and no military uniform.

#9 OTHER ☒ CERTIFIED MAIL RETURN RECEIPT REQUESTED 70070220000392389862

Sworn to before me on August 1, 2008



PATRICIA ROTHFRITZ
 NOTARY PUBLIC, State of New York
 01R06055503, Nassau County
 Term Expires February 26, 2011



Denise Klass
 Server's Lic #
 Invoice•Work Order # 0810162